DECLARATION FOR PATENT APPLICATION

	Original	Supplemental	Substitute	☐ PCT		
	As a below named inventor, I hereby declare that:					
	My residence, post office address and citizenship are as stated below next to my name.					
plural n		l, first and sole inventor (if only one he subject matter which is claimed a				
	Surgical Na	avigation Systems and Processes fo		roplasty		
the sne	cification of which (check of	(Title of the Ir	ivention)			
the spec	circuiton of winer (check t	one)				
	\boxtimes	is attached hereto				
		was filed on	as U. S. Application Se	rial Number or PCT		
i.i.		International Application Numbe	r			
		and was amended				
	(if applicable)					
	I hereby state that I have ed by any amendment refer	reviewed and understand the content red to above.	ts of the above-identified specifica	ntion, including the claims, as		
	I acknowledge the duty to	disclose information which is mate	rial to the patentability of this app	lication in accordance with		
***	, Code of Federal Regulati		F			
	Therefore deline Commission and	Control on the state of the state of	10 0.1.0110() (1) 0	26642		
E H.B	inereby claim foreign pri	iority benefits under Title 35, United or's certificate, or § 365(a) of any PC	States Code, § 119 (a) - (d) or § . Tinternational application which	designated at least one		
country	other than the United State	es of America, listed below and have	also identified, by checking the b	ox below, any foreign		
applica	tion for patent or inventor's	certificate, or of any PCT internation				
onwhic	ch priority is claimed.					

Prior	Prior Foreign Applications		Priority Claimed		Copy Attached	
Application Number	Country	Foreign Filing Date (MM/DD/YYYY)	YES	NO	YES	NO
1					,	

I hereby claim the benefit under Title 35, United States Code § 119(e) of any United States provisional application(s) listed below and claim the benefit under Title 35, United States Code, § 120 of any United States application(s), or § 365(c) of any PCT international application(s) designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application(s) in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, § 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application:



Inventors: Christopher P. CARSON

For: Surgical Navigati n Systems and Processes for Unicompartmental Knee Arthr plasty

Declaration for Patent Application

Page 2

Parent Application Number	Filing Date	Status (Mark Appropriate Column Below)		
-		Patented	Pending	Abandoned
60/271,818	February 27, 2001		Х	
60/355,899	February 11, 2002		Х	

As a named inventor, I hereby revoke all prior powers and appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith:

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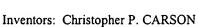
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For: Surgical Navigation Systems and Processes f r Unic mpartmental Knee Arthroplasty

Declaration for Patent Application

Page 3

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon

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